

LSI LOGIC

**FAX**

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Date July 28, 2005Number of pages including cover sheet: 5**To: USPTO/Office of Publications**Phone (703) 305-8283Fax Phone (703) 746-4000

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**From: Mark Salvatore**Intellectual Property  
ParalegalPhone (408) 433-7472Fax Phone (408) 433-7460**REMARKS:**

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Re: 10/721,843

07/28/2005

15:17

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PTO/SB/21 (09-04)

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

4

Application Number

10/721,843

Filing Date

November 26, 2003

First Named Inventor

Wurzer, Steven G.

Art Unit

2816

Examiner Name

Nguyen, Hai L.

Attorney Docket Number

03-2104

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <ul style="list-style-type: none"> <li>1. Power of Attorney and Correspondence Address Indication Form, PTO/SB/81</li> <li>2. Statement Under 37 CFR 3.73(b), PTO/SB/96</li> </ul>
<b>Remarks</b> - Issue Fee Payment		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	LSI Logic Corporation		
Signature			
Printed name	Timothy R. Croll		
Date	25 July 2005	Reg. No.	38,771

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Signature	
Typed or printed name	Mark Salvatore
	Date

7-28-05

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